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**\*BIBDATASHEET\***

CONFIRMATION NO. 5238

Bib Data Sheet

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/846,116	04/30/2001	709	2155	54330/308316
RULE				

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/200,277 04/28/2000 and claims benefit of 60/200,269 04/28/2000  
 and claims benefit of 60/200,270 04/28/2000  
 and claims benefit of 60/200,279 04/28/2000  
 and claims benefit of 60/200,281 04/28/2000  
 and claims benefit of 60/200,280 04/28/2000  
 and claims benefit of 60/200,283 04/28/2000  
 and claims benefit of 60/200,282 04/28/2000  
 and claims benefit of 60/200,266 04/28/2000  
 and claims benefit of 60/200,264 04/28/2000  
 and claims benefit of 60/200,268 04/28/2000  
 and claims benefit of 60/200,278 04/28/2000  
 and claims benefit of 60/200,267 04/28/2000  
 and claims benefit of 60/200,276 04/28/2000  
 and claims benefit of 60/200,265 04/28/2000  
 and claims benefit of 60/200,275 04/28/2000  
 and is a CIP of 09/815,222 03/22/2001  
 which is a CIP of 08/863,671 05/27/1997 PAT 5,927,265  
 and is a CIP of 09/053,960 04/02/1998 PAT 5,990,466  
 and is a CIP of 09/064,988 04/23/1998 PAT 6,140,626  
 and is a CIP of 09/169,523 10/09/1998 PAT 6,008,483  
 and is a CIP of 09/199,902 11/25/1998 PAT 6,060,701  
 and claims benefit of 60/191,343 03/22/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/28/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NY	14	14	2
Verified and Acknowledged	Examiner's Signature	Initials			

**ADDRESS**

23370

**TITLE**

RAPID COOKING OVEN WITH BROADBAND COMMUNICATION CAPABILITY TO INCREASE EASE OF USE

**FILING FEE  
RECEIVED**  
420FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:☐ All Fees☐ 1.16 Fees ( Filing )☐ 1.17 Fees ( Processing Ext. of  
time )☐ 1.18 Fees ( Issue )☐ Other \_\_\_\_\_☐ Credit